

NAF HBP Benefits Information



Credentialing of Doctors

If you wonder how doctors become part of the Aetna network of doctors, you are not alone. Many people are curious as to what qualifications network doctors must have in order to participate.

Providers who want to participate in Aetna's network must submit an application and successfully complete Aetna's credentialing process. Aetna screens its doctors thoroughly before allowing them to be considered part of their network of doctors. Aetna requires providers to present information that documents training, education, and other relevant information, including the following:

1. Admitting privileges at participating hospitals, when applicable
2. Board certifications
3. Current professional liability coverage
4. Drug Enforcement Agency
5. Disciplinary history or adverse actions related to licensure
6. Licensure and/or certification
7. Malpractice insurance claim history
8. Managed care participation
9. Participation in government programs, such as Medicare/Medicaid
11. Professional associations
12. Professional education and training
13. Work history

Aetna also uses professional sources to check information submitted as well. Here are a few examples:

1. American Medical Association
2. Attending physicians
3. Hospitals
4. Medical schools and training programs
5. National Practitioner Data Bank and Health Integrity Protection Data Bank
6. Professional liability insurance carrier
7. Professional references
8. State licensing boards

In addition, Aetna may conduct on-site visits to review medical record-keeping practices and other factors, such as appointment availability, confidentiality of member information, appointment wait time, after-hours access, coverage, waiting room capacity, facility access, office equipment, and the use of allied health professionals.

Peer review committees within each local plan make the credentialing determinations. Those doctors who do not meet these determinations are excluded from participating.

During the re-credentialing process, Aetna looks at information such as performance, over/under utilization, medical records, member satisfaction survey information, and complaints.

Aetna is always looking to expand their network of doctors

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while committing to provide high quality levels of care.

Packets to initiate the credentialing process may be found from www.aetna.com. Just click on "Physicians and Hospitals", "medical" and then "Request Provider Application". That packet may be used by your out-of-network doctors that may want to become a part of the Aetna network.

Out-Of-Pocket Annual Limit and Deductibles

The NAF HBP individual and family Out-of-Pocket limit is the maximum amount you pay for your share of covered expenses in a calendar year. The NAF HBP includes deductibles in your Out-of-Pocket limit as well as coinsurance. A deductible is the amount you pay before the NAF HBP benefits begin.

For Example:

PPO plan Single Only

(\$200 deductible and \$2,000 out-of-pocket limit for in-network doctors)

In-network claim for - \$500

Applied to deductible - \$200

Remaining - \$300

Payable at 90% - \$270 (Aetna pays)

Applied to the out-of-pocket limit:

Deductible - \$200

Your coinsurance- 10% of \$300 - \$30

Total applied to out-of-pocket limit

\$230 (\$500 - \$270 = \$230)

Your \$200 deductible and \$30 payment to the doctor is subtracted from your yearly maximum.

Remember, once your covered expenses reach \$2,000, medical expenses are reimbursed at 100% for the remainder of the calendar year for in-network expenses.

Enrolling newborns for medical coverage within 31 days



Are you pregnant or thinking about starting a family? Remember, you must enroll your newborn within 31 days of the delivery date or the newborn will not receive medical insurance.

Just like Open Season where there is a window to change your benefits, the 31 days from your delivery date is the window in which

you must enroll your newborn for insurance. Once the 31 days expires, you will not have another opportunity until Open Enrollment.

Please contact your local HRO for the enrollment form for submittal to Aetna for processing. Once your newborn is enrolled, you should contact Aetna member services to coordinate processing of the initial newborn expenses.